



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c)(4)) is subject to a penalty fee of \$25.00.

| | | | |
|---|-------------|---|-------------------------|
| 1. Corporate ID No. 76358 | | 2. Name of Corporation MLS Screw Machine Corp. | |
| 3. Street Address Principal Business Office 10 Dexter Road | | City East Providence | State RI |
| 4. Business Phone No. (401) 435-3850 | | 5. State of Incorporation RHODE ISLAND | |
| 6. Brief Description of the Character of Business Conducted in Rhode Island PURCHASE, ACQUIRE, SELL, DISTRIBUTE AND GENERALLY DEAL WITH MERCHANDISE OF EVERY KIND AND NATURE | | | |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| President Name Maria Soares | | Vice President Name None | |
| Street Address 10 Dexter Road | | Street Address | |
| City East Providence | State RI | Zip 02914 | City East Providence |
| Secretary Name Maria Soares | | Treasurer Name Maria Soares | |
| Street Address 10 Dexter Road | | Street Address 10 Dexter Road | |
| City East Providence | State RI | Zip 02914 | City East Providence |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS | | | |
| Director Name Maria Soares | | Director Name | |
| Street Address 10 Dexter Road | | Street Address | |
| City East Providence | State RI | Zip 02914 | City East Providence |
| Director Name | | Director Name | |
| Street Address | | Street Address | |
| City | State | Zip | City |
| 9. SHARES AUTHORIZED | | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | |
| This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet. | | ISSUED SHARES — THIS SECTION MUST BE COMPLETED | |
| | | Number of Shares 1,000 | Class/Series common |
| | | | Par Value no par |

2012 JAN 23 PM 3:37
 RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

File Date: JAN 23 2012

Check No. 161304

BY [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature: [Signature] Date: JAN 9, 2012

Print or Type Name: Maria Soares

Title: President